PASS THE TORCH 616 KEARNEY CIRCLE Ynchester, NH 03104

RECEIVED

2013 JUL 24 AM 9: 08

	LO MAIL CENTER
PASS THE TORCH	
If registered, FEC ID:	
Today's Date:	
07.16.2013	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:
MICHAEL HARTWICK , Treasurer

00 30310947

FEC

STATEMENT OF **ORGANIZATION**

RECEIVET 7

FORM 1			ZUIJ JUL 24 AM 9:08
NAME OF COMMITTEE (in	(Check if name Ex-	ample:If typing, type 1 or the lines.	2FE4M5
PASS TH	E TORCH		
ADDRESS (number a	id street) 6/6 KEARNEY	CIRCLE	
(Check if is changed			
	MANCHES, TER	<u> </u>	7.H 0.3.1.0.4- ZIP CODE A
COMMITTEE'S E-MA			
(Check if is change	ddress HEYOPASSTH	ETORCHPAC	.COM.
	Optional Second E-Mail Address		
COMMITTEE'S WEE (Check if is change)	PAGE ADDRESS (URL) ddress	ASSTHETO	RCHPAC.COM
2. DATE O	7'16'2013		
3. FEC IDENTIFIC	ation number C	·	
4. IS THIS STATE	IENT X NEW (N) OR	AMENDED (A)	
I certify that I have	examined this Statement and to the best of my	knowledge and belief it is t	rue, correct and complete.
Type or Print Name	of Treasurer	rfwick	
Signature of Treasur	Mather.	Da	· ÖT'll'ŽÕÌŠ
NOTE: Submission of	íalse, erroneous, or incomplete information may su ANY CHANGE IN INFORMATION SH		
Office Use Only		For further information conta- Federal Election Commission Toll Free 800-424-9530 Local 202-894-1100	FEC FORM 1 (Revised 06/2012)

FEC For	m 1 (Revised 02/2009)			Page 2
TYPE OF CO				
	Committee:			
(a)	This committee is a principal campaign or	ommittee. (Complete the can	didate information belov	v.)
(b)	This committee is an authorized committee information below.)	e, and is NOT a principal ca	impaign committee. (Co	mplete the candidate
Name of Candidate				
Candidate	Office	University Comment	. Buraidant	State
Party Affiliatio	on Sought:	House Senat	e President	District
(c)	This committee supports/opposes only on	e candidate, and is NOT an	authorized committee.	
Name of Candidate				
		_ 		
Party Com		National, State		(Democratic,
(d)	This committee is a	or subordinate) committee of	the	Republican, etc.) Party
Political Ac	ction Committee (PAC):			
(e)	This committee is a separate segregated	fund. (Identify connected orga	anization on line 6.) Its c	onnected organization is
	Corporation	Corporation w/o Ca	pital Stock	Labor Organization
	Membership Organization	Trade Association		Cooperative
	in addition, this committee	is a Lobbyist/Registrant PAC.		
(1)	This committee supports/opposes more to committee, (i.e., nonconnected committee)		and is NOT a separate	segregated fund or part
1	In addition, this committee is a Loh	byist/Registrant PAC.		
	In addition, this committee is a Lea	dership PAC. (Identify sponso	ır an line 6.)	
Latan Marada	untata a Banana antathan			
	raising Representative:			
(g)	This committee collects contributions, pays committees/organizations, at least one of w			
(h)	This committee collects contributions, pays committees/organizations, none of which is	fundraising expenses and dis an authorized committee of a	burses net proceeds for federal candidate.	two or more political
Comr	mittees Participating in Joint Fundrais	er		
1.			EC ID number C	
			C ID number C	
2.			EC ID number C	
2. 3.		╽ ┈ ╽┈╽┈╽┈╽┈	EC ID number C	

İ	FEC Form 1 (Revise	ed 02/2009)					Page 3
w	rite or Type Committee Na		· · · · · · · · · · · · · · · · · · ·				
6.	Name of Any Connected	d Organization, Affi	liated Committee,	Joint Fundrai	sing Represe	ntative, or Le	padership PAC Sponsor
		11111					
	Mailing Address						
					ШШ		
			CITY		LLI L	TATE	ZIP CODE
	Relationship: Connec	cted Organization	Affiliated Committee	ee Joint F	undraising Re	oresentative	Leadership PAC Sponsor
7.	Custodian of Records: I books and records.	dentify by name, add	dress (phone numb	er optional)	and position	of the person	in possession of committee
	Full Name	RAH M.	PANN			1 1 1 1	
	Mailing Address	616 K	EARNEY	CIRC	LE		
		41.16.11	17 TED	<u> </u>		111 1	2101/
		VIAINCIT	E2141		لا ليا	את אינ	<u>3.L04</u>
	Title or Position	7	CITY		ST	ATE	ZIP CODE
	CHAIRN	1AN	لببيا	Telep	phone number	6.03	1-296-5093
8.	Treasurer: List the name any designated agent (e.g) of the treas	urer of the co	mmittee; and	the name and address of
	Full Name	IKE. 1	4ARTh)IC	K		
	of Treasurer Mailing Address	\$3	CID	ER	MILL	- Ro	
		المراج	3000			111-	317
		LISTI	CITY	1.1.1.1	LLI 👠 ST	ATE	ZIP CODE
	Title or Pestion	SURER	<u> </u>	Telec	phone number		1-8601-7823

_	PEC Form	1 (Hevised 02/2009)		rage 4
_				
	Full Name of Designated Agent	SARAH M. PONN		لىسىسى
	Mailing Address	66 KEARNEY C	IRC	
		MANCHESTER	NH: STATE	231,0,4- ZIP CODE
	Title or Position			
		Telephone no	umber	
			· · · · · · · · · · · · · · · · · · ·	
9.	Banks or Other I safety deposit box	Depositories: List all banks or other depositories in which the commes or maintains funds.	ittee deposits	funds, holds accounts, rents
	Name of Bank, De	epository, etc.		
	1	Bank of AMECICA		
	Mailing Address	620, 54M, St.	4111	
		MANCHESTER	WH	03/01/-
		СІТУ	STATE	ZIP CODE
	Name of Bank, De	epository, etc.		
	Mailing Address			
				لىسا-لىسا
		CITY	STATE	ZIP CODE
-	· · · · · · · · · · · · · · · · · · ·			

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate he	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 7 / 18/13
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
Jm D.	7/24/13
PREPARER (7/2013)	DATE PREPARED
Other (Specify): Date of Rec	ceipt or Postmarked